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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVESU.S. House of Representatives
112th CongressOriginal X AmendmentForm was left
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packetMEMBER / OFFICER
POST-TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from a private source for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately-funded travel on the Member or officer's annual Financial Disclosure Statement. In accordance with clause 5 of House Rule 25, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within 15 days after travel is completed. The Clerk is to make these forms available to the public as soon as possible after they are received. Obtain the dollar amounts from the sponsor; if exact dollar amounts are unavailable, provide a good faith estimate.

Name of Member or Officer (print or type): Tim Scott

Name of Accompanying Family Member (if any): _____

Relationship to Member/Officer: ☐ Spouse ☐ Child ☐ Other (specify): _____Date of Departure and Date of Return: 3-5-11Dates at personal expense: N/AItinerary (cities of departure - destination - return): Previously SubmittedSponsor(s) (who paid for the trip): Club For Growth

Describe meetings and events attended (attach additional pages if necessary): _____

Panel Participant at Legislative Conference

Attached to this form are EACH of the following (signify "yes" for each item by checking the corresponding box):

1. ☐ the Private Sponsor Travel Certification Form completed by trip sponsor, including all attachments;
2. ☒ the Privately-Sponsored Travel Approval Form completed by the Member or officer; and
3. ☒ the Committee on Ethics letter approving my participation on this trip.

I represent that I participated in each of the activities reflected in the sponsor's agenda (signify "yes" by checking box): ☐

If not, explain: _____

Forwarded
Already

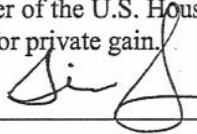
TRIP EXPENSES:

	Total Transportation Expenses	Total Lodging Expenses	Total Meal Expenses
For Member or Officer:	\$ 507	\$ 598	220
For accompanying family member:			

	Other Expenses (dollar amount)	Specific Nature of Expenses (e.g., taxi, parking, registration fee, etc.)
For Member or Officer:	\$ 158	
For accompanying family member:		

I certify that the information contained in this form is true, complete, and correct to the best of my knowledge. I have determined that all of the expenses listed above were necessary and that the travel was in connection with my duties as a Member or Officer of the U.S. House of Representatives and would not create the appearance that I am using public office for private gain.

SIGNATURE OF MEMBER OR OFFICER: _____



DATE: _____

4-7-11

U.S. House of Representatives
Committee on Ethics

PRIVATELY SPONSORED TRAVEL: TRAVELER FORM

1. Name of Traveler: Tim Scott
2. Sponsor(s) (who will be paying for the trip): Club for Growth
3. Travel destination(s): Palm Beach, FL
4. a. Date of Departure and Date of Return: D: 3/5 R: 3/5
- b. Will you be extending the trip at your personal expense? ☐ Yes ☒ No
If yes, dates at personal expense: _____
5. a. Will you be accompanied by a family member at the sponsor's expense? ☐ Yes ☒ No
b. If yes, name of accompanying family member: _____
c. Relationship to traveler: ☐ Spouse ☐ Child ☐ Other (specify): _____
6. a. Did the trip sponsor answer "yes" to Question 9(c) on the Trip Sponsor form (i.e., the travel is being sponsored by an entity that employs a lobbyist)? ☐ Yes ☒ No
b. If yes, check one of the following: ☐ N/A – Sponsor checked 9(a) or 9(b)
(1) Approval for one-night's lodging and meals is being requested: ☐ or
(2) Approval for two-nights' lodging and meals is being requested: ☐
If "(2)" is checked, explain why the second night is warranted: _____
7. Private Sponsor Travel Certification Form is attached, including agenda, invitee list, and any other attachments (indicate that form is attached by checking box): ☒
8. Explain why participation in the trip is connected to your individual official or representational duties:
Serving on a panel w/ other members of Congress to discuss Freshman legislative
9. FOR STAFF: experience and other legislative matters.
TO BE COMPLETED BY YOUR EMPLOYING MEMBER:

I hereby authorize the individual named above, an employee of the U.S. House of Representatives who works under my direct supervision, to accept expenses for the trip described in this request. I have determined that the above-described travel is in connection with my employee's official duties and that acceptance of these expenses will not create the appearance that the employee is using public office for private gain.

Date: Feb 25, 2011

[Signature]
Signature of Employing Member

NOTE: This page must be submitted with your post-travel disclosure form within 15 days of your return, so you should maintain a photocopy of the completed form for your records.

U.S. House of Representatives
Committee on Ethics

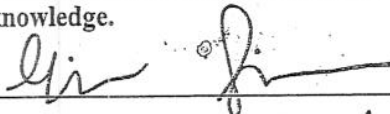
PRIVATELY SPONSORED TRAVEL: TRAVELER FORM
For Members, Officers, and Employees

This form should be completed by House Members, officers, or employees seeking Committee approval of privately-sponsored travel or reimbursement for travel under House Rule 25, clause 5. The completed form should be submitted directly to the Committee by each invited House Member, officer, or employee, together with the completed and signed Private Sponsor Travel Certification Form and any attachments. A copy of this form, minus this initial page, will be made available for public inspection. *Please type form. Form (and any attachments) may be faxed to the Committee at (202) 225-7392.*

YOUR COMPLETED REQUEST MUST BE SUBMITTED TO THE COMMITTEE NO LESS THAN 14 DAYS BEFORE YOUR PROPOSED DEPARTURE DATE. Absent exceptional circumstances, permission will not be granted for requests received less than 14 days before the trip commences.

Name of Traveler: TIM SCOTT

I certify that the information contained on both pages of this form is true, complete, and correct to the best of my knowledge.

Signature: 

Name of Signatory (if other than traveler): LIZZY SIMMONS

For staff, name of employing Member/Committee: TIM SCOTT

Office address: 1117 LHOB

Phone number: 202-225-3176

Email address of contact person: elizabeth.simmons@mail.house.gov

☐ Check this box if the sponsoring entity is a media outlet and the traveler is a Member traveling to make a media appearance sponsored by that entity and these forms are being submitted to the Committee less than 14 days before the trip departure date.

NOTE: You must complete the contact information fields above, as Committee staff may need to contact you if additional information is required.

If there are any questions regarding this form please contact the Committee:

Committee on Ethics
U.S. House of Representatives
1015 Longworth House Office Building
Washington, DC 20515
(202) 225-7103 (phone)
(202) 225-7392 (fax)